

## ECS Configuration Change Request

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CCR No. 97-0790	Logged Date 5/14/97	Rev.	Request Type
Priority Routine <input type="checkbox"/> Urgent <input type="checkbox"/> Emergency <input checked="" type="checkbox"/>	Affected Release		Change Class
Title (description)			
Documents Affected		Source Nos (RID, NCR, Action Item, GSFC CCR, etc.) or Tech Reference	
RTM Change <input type="checkbox"/> Start New Baseline <input type="checkbox"/>			
Problem			
Install FrameMaker software on the following 2 pcs: <u>pc 1:</u> serial #: 75767 8-0038 user: Marina Glad location: 2156A EIN: E-B27365		<u>pc 2:</u> serial #:71026-0004 user: Pat Irwin location:1029R EIN:E-B27338	
Proposed Solution			
<b>Impact Analysis:</b> Organizations Affected: BOO <input type="checkbox"/> Contracts <input type="checkbox"/> ECS Chief Eng <input type="checkbox"/> FOS <input type="checkbox"/> M&O <input type="checkbox"/> Procurement <input type="checkbox"/> QO <input type="checkbox"/> Rel. Dev <input type="checkbox"/> Rel. A <input type="checkbox"/> Rel. C <input type="checkbox"/> SCDO Arch. <input type="checkbox"/> Science Off <input type="checkbox"/> Security <input type="checkbox"/> Subcontract <input type="checkbox"/> Sys. Eng <input type="checkbox"/> Sys Verf Acpt <input type="checkbox"/>			
Cost: None <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> (Not exceeding \$100,000) (\$100,000 to \$500,000) (Over \$500,000)			
Schedule: None <input type="checkbox"/> Other _____ Additional LOC _____ Man-Months _____ Materials _____			
Originator _____ Signature _____ Date _____			
Office _____ Office Manager _____ Signature _____ Date _____			
Disposition Approved <input type="checkbox"/> Approved w/Comment <input type="checkbox"/> Forward <input type="checkbox"/> Disapproved <input type="checkbox"/> Comments:  CCB Chairperson _____ Signature _____ Date _____			